

30-DAY NOTICE TO VACATE PREMISES

Tenant Information

Name:

Email:

Contact Phone # :

Property Information

Rental Property Address:

City:

State:

ZIP Code:

Notice Information

Date of notice:

Date of move-out:

Reason for move-out / notice:

Forwarding Address Information

Forwarding address:

City:

State:

ZIP Code:

Additional Information:

Resident(s) hereby give 30 days notice to vacate the above premises according to Oregon Law, and agree to relinquish possession of the above premises on move-out date listed above. Resident(s) agrees and understands that the above listed premises may be shown at reasonable times prior to the expiration of this notice after Owner/Agent issues appropriate notice to enter.

Resident(s) also understand that if they remain in possession of the above listed premises after the date listed above they will incur substantial costs in the amount of \$100/day until possession is turned over to the Owner/Agent. This is due to Owner/Agent's loss of time for maintenance and/or turn-over work and the inability to access and re-rent the unit.

If you have any questions, please call us at 503-507-4248.

Signature of Tenant:

Date: